



QUESTIONNAIRE FOR THE UN SYSTEM AND OTHER INTERGOVERNMENTAL ORGANIZATIONS REGARDING WRITTEN CONTRIBUTIONS TO THE UNPFII

This document contains a summary of results and activities the United Nations Population Fund (UNFPA) has contributed towards, with and in support of, indigenous peoples in recent years, with a particular focus on 2010, addressing in particular indigenous women's rights and reproductive rights, in line with the recommendations of the Permanent Forum. The activities of the Fund have focused on promoting indigenous peoples' rights, including reproductive rights, through supporting increased access of indigenous peoples and ethnic minorities to enhanced quality "intercultural" reproductive health services, with emphasis on pertinent policies, norms and improved services, largely aimed at addressing maternal mortality among indigenous women. UNFPA has also worked on supporting indigenous youth, including migrant youth, and has contributed to advancing gender equality and empowerment among indigenous women and their organizations, but also targeting adolescents and youth. Through research studies and data collection, dissemination and usage promotion, UNFPA has contributed to increase the knowledge base on the situation of indigenous peoples, particularly women, and ethnic minorities in Latin America, Asia and Africa. Additionally, UNFPA has focused its activities around population and development, particularly on the collection, analysis, dissemination and use of disaggregated data on indigenous populations. In all its work, UNFPA incorporates a gender and culturally sensitive, human rights-based approach, promoting inclusive, participatory initiatives in favour of indigenous peoples and ethnic minority populations.

1. At its tenth session in 2011, UNPFII will review its recommendations in relation to (a) Economic and Social Development; (b) Environment; (c) Free, Prior and Informed Consent.

(i). Please provide information on how your Office is dealing with this important issue in the seven regional areas of the Permanent Forum (In the case of UNFPA please address issues on a) Population and Development; b) Sexual and Reproductive Health; c) Gender equality and women's empowerment)¹.

Sub-regional Office for the Caribbean (SRO)

The majority of the programmes that UNFPA SRO for the Caribbean supports incorporate indigenous peoples' issues. With regard to indigenous populations in the Caribbean region, UNFPA mainly works in Belize, Suriname and Guyana. UNFPA's approach or contribution in this area has focused on sexual and reproductive health and gender equality and empowerment of women. Some of the specific areas of contribution across the three respective countries include: capacity building and empowerment; women's empowerment and the participation of women in leadership; youth empowerment and participation in particularly youth friendly spaces, life skills, and participation of indigenous youth in UNFPA's Youth Advisory Group

¹ UNPFII's seven socio-cultural regions are Africa; Asia; Central and South America and the Caribbean; the Arctic; Central and Eastern Europe, Russian Federation, Central Asia and Transcaucasia; North America; and the Pacific.

(YAG); improvement in reproductive health awareness and services among indigenous peoples, particularly in the areas of maternal health and adolescent sexual and reproductive health; and in terms of population and development, UNFPA in the sub-region, continues to focus on census execution.

Bolivia

UNFPA, Bolivia's work in this area has included the dissemination of the Declaration of the Rights of Indigenous Peoples in collaboration with the Indigenous Fund for the Development of the Peoples of Latin America and the Caribbean, the Coordinator of Indigenous Organizations of Bolivia (COINCABOL), the Ministry of Foreign Affairs, and the United Nations System of Bolivia.

On population and development, work is being done in coordination with indigenous organizations, for the inclusion of ethnical definition data (self-identification) and gender in the 2011 census. UNFPA focused on language and communications as an instrument to incorporate the intercultural perspective. The official website of UNFPA Bolivia is available in three native languages - Quechua, Aimara, and Guaraní. Moreover, UNFPA in Bolivia has conducted joint research on sexual and reproductive health with various indigenous Universities and the Ancestral Community of the Millennium Heritage, which favours an approach focused on the concept of "quality livelihood". UNFPA, in coordination with the Indigenous Fund and PAHO/WHO, collected and documented indigenous peoples' knowledge of sexual and reproductive health. UNFPA conducted workshops on the rights of women and sexual and reproductive health with an emphasis on maternal health, contraception and the prevention of cervical uterine cancer.

Within the framework of the Secretary General's campaign, UNiTE to End Violence against Women, the National Conference on Public Policies and Protection of Women's Rights was conducted. There was significant participation by indigenous women. Outcomes from the Conference included concrete recommendations and proposals on issues of violence against women, specifically indigenous women. In addition, UNFPA is working with the "Viceministerio de Justicia Indígena Originaria Campesina" (VJIOC) to include the gender and generational approach in the Law of Jurisdictional Demarcation. (This law confers legal status to the indigenous jurisdiction at the same level as the ordinary legal system.)

Colombia

In 2010, UNFPA Colombia's work with indigenous populations included the provision of technical and financial support for the consolidation of a National Council of Indigenous Women. As a result, women were well represented at the last National Indigenous Congress. However, UNFPA Colombia still recognizes the need for increased investments to scale-up the participation of indigenous women which can help to secure positions for women in the Indigenous Parliament. Moreover, UNFPA Colombia provided technical and financial support to the Colombian Indigenous Organization to, among others, design a proposal for a study on the current situation of indigenous women around reproductive health, gender, and gender-based violence.

In 2010, UNFPA Colombia organized the International and Inter Cultural Health Meeting. Seven countries including Peru, Bolivia, Ecuador, Mexico, Guatemala and Colombia, public servants, health personnel, and indigenous midwives and authorities, shared their experiences on working with an intercultural approach to improve the health of indigenous women.

Moreover, after three years of supporting the Embera Wera people in Risaralda, the practice of female genital mutilation/cutting was prohibited by the community. The direct participation and empowerment of women in the Embera Wera community was a significant factor in this outcome.

Ecuador

With the support of Spain, UNFPA in Ecuador is supporting a project to reduce maternal mortality and morbidity and to strengthen indigenous women's organizations advocacy work to influence public policy-making and to empower women and young girls.

Mexico

In the area of population and development, UNFPA Mexico has promoted the inclusion of indigenous peoples in socio-demographic data collection, such as in the 2010 Population and Housing Census, and has also promoted the use of this information in the formulation and evaluation of public policies. Additionally, UNFPA Mexico has participated in technical committees for the discussion of census questionnaires and in the review of the indicators for the evaluation of poverty among indigenous peoples. In 2011, UNFPA Mexico has committed to support the 3rd Congress of the National Network on Indigenous Population Studies.

In the areas of sexual and reproductive health and gender equality, UNFPA has supported two relevant projects: one on maternal health and prevention of gender based violence among indigenous communities in the States of Chiapas, Hidalgo, and Veracruz and another UN interagency programme for the prevention of gender based violence in indigenous communities in Mexico with an intercultural approach, focusing on children and teenage girls and boys in 30 municipalities in the States of Oaxaca and Chiapas.

Nicaragua

In coordination with the Nicaraguan Women's Institute, UNFPA Nicaragua provided financial and technical support for the development of a Gender Equality Policy in Multi-Ethnic settings in the North Atlantic Autonomous Region. This Gender Policy is an important tool to achieve the goals outlined in the Statute of Autonomy of Indigenous Peoples and Ethnic Communities of the Autonomous Regions. The aim is to have a multi-ethnic society where women and men of Miskitu, Panamahka, Twahkas, Creoles and Mestizos origin can live with dignity and justice.

El Salvador

In El Salvador, UNFPA has provided support for the promotion of participation of indigenous peoples in decisions which directly or indirectly affect their lifestyles, traditional lands and territories, cultural integrity as indigenous peoples with collective rights or any other aspect of their lives, considering the principle of free, prior and informed consent.

Suriname

In Suriname, UNFPA has provided support to the Medical Mission, which provides healthcare to people living in marginalized conditions. The Medical Mission (officially established in 2001) currently manages 55 clinics, serving an estimated 50,000 persons scattered across a scarcely populated area. This organization employs health assistants who are trained specifically in these areas.

Cambodia

Indigenous peoples' issues are a part of the Health Sector Support Programme jointly funded by the French Development Agency, AusAID, the Belgium Technical Cooperation, DFID, UNFPA, UNICEF, and the World Bank, with programmes aimed at providing access to health care services to indigenous peoples. Staff working at the health centres and health posts in indigenous areas generally have been selected locally and can communicate in the local languages. Enhanced community participation in the indigenous communities has been made in the form of community score cards on health care services which encourage the involvement of indigenous peoples in providing feedback on the quality of health care services. In addition, UNFPA supports reproductive and maternal health initiatives with focused attention on locations where most indigenous peoples live such as Rattanakiri, Mondulokiri, Stung Treng, Kratie, Preah Vihear and Siem Reap provinces.

China

UNFPA, China has started to consider ethnic minorities in the framework of the UN Joint Programme, "Culture and Development Partnership Framework" (CDPF) which covers the period 2009-2011. The CDPF aims at integrating culture into development specifically for China's ethnic minority populations through building government capacity to undertake rights and culture-based development and supporting China in implementing policies that promote the rights of its ethnic minority groups. Within this framework, UNFPA, jointly with UNICEF and WHO, is piloting a culturally sensitive approach to maternal health care and service provision in ethnic minority areas.

Lao People's Democratic Republic

Currently, UNFPA in collaboration with UNICEF and USAID as well as other development partners supports the Government in carrying out the Lao Social Indicator Survey (MICS/DHS) which covers 1,000 sampled villages including those of tribal or ethnic groups. The survey covers various topics, such as RH, education, domestic violence, and youth issues. The analysis will be disaggregated at the national and provincial level. Moreover, UNFPA is supporting the Ministry of Health and community-based organizations to reach the most vulnerable and remote ethnic communities to provide family planning services. In addition, UNFPA supports capacity strengthening of the National Commission of the Advancement of Women and the National Assembly in order to facilitate participation of women, including ethnic women, in decision-making spheres at all levels.

Mongolia

To address issues such as high maternal mortality and gender inequality, UNFPA Mongolia has been implementing projects in the Bayan-Ulgii province since 2002, mainly focusing on improving quality of sexual and reproductive health services, changing behaviors, and raising awareness on gender-related issues. Similar projects are supported by UNFPA in Khuvsgul province, as the "Tsaatan" population is currently the only indigenous group formally recognized in the country.

Nepal

Issues of caste and ethnicity have been added to the questionnaire of the upcoming population census for 2011. This will provide disaggregated data for planning and monitoring development policies and programmes.

UNFPA Nepal is a member of the inter-agency Social Inclusion Action Group (SIAG), which promotes workforce diversity within the UN. Within that framework, the SIAG is supporting the government to revise the civil servant personnel record system to include caste and ethnic information. The government has a policy and commitment to achieve 45 per cent representation in government posts at all levels by socially excluded groups including indigenous peoples.

The Philippines

UNFPA supports data collection that includes basic demographic information in the National Census on Population and Housing on indigenous peoples and ethnic minorities, as well as initiatives in favor of indigenous youth. UNFPA has also supported intercultural human rights approaches to sexual and reproductive health, including programmes aimed at ensuring availability and access to modern, safe and effective methods of birth spacing through localized and customized distribution system of family planning supplies including the provision of culturally sensitive-information on family planning. In addition, UNFPA supports initiatives to prevent gender-based violence and empower indigenous women. It also supports gender mainstreaming in development plans and programmes, including those for indigenous peoples.

Thailand

The ongoing UNFPA funded project on population ageing (2007-2011) supports Thailand's efforts to build capacity of the government, NGOs, media and civil society organisations at national and sub-national levels for effective policy formulation and implementation in response to the rapid population ageing in Thailand. This comprehensive multi-sector project addresses the well-being of older persons in the areas of health, social and economic security which fits in the local context, culture and needs of

the different population groups. This includes older persons in urban and rural areas, both the Thais and the ethnic groups. The project is being implemented in three Northern provinces namely Chiang Mai, Lampang and Mae Hong Son because ageing is faster in the Northern provinces than other regions and they are home to the ethnic minorities of different cultures, languages and ways of life. Some groups have been living in this part of the country for hundreds of years while some groups migrated from Southern China and Burma during the past five decades. Most of the ethnic groups are living in poverty and reside in remote and difficult terrains.

Moreover, UNFPA supports national efforts to improve access to maternal health services for women at reproductive age in selected areas of Narathiwat, where Thai-Malay groups live, and Mae Hong Son where Karen groups live.

Viet Nam

For UNFPA Viet Nam, ethnic minority population issues have been mainstreamed in three areas: a) population and development; b) sexual and reproductive health; and c) gender equality and women's empowerment.

Currently, the government is developing several new strategies for the 2011-2020 period. All these strategies pay special attention and priority to remote and mountainous areas as well as vulnerable populations, including ethnic minority groups. For this new period of assistance, UNFPA has supported and advocated for the integration of gender-based violence and gender mainstreaming into national strategies.

UNFPA has supported the government in the analysis and dissemination of the population and household census data and has advocated for the utilization of the findings for evidence-based research, policy planning and development and to include issues of ethnic minority groups, such as education, migration and urbanization, age structure and marital status, and mortality and fertility. The findings have shown that in spite of substantial progress made in achieving MDGs, ethnic minority groups are still vulnerable and left behind. Based on these key findings, UNFPA has developed policy briefs with suggestions for policy options to improve the gaps in education, health care, maternal health, and living conditions for ethnic minority groups.

Republic of Congo

In 2009 and 2010, UNFPA held several consultations with indigenous leaders at national and provincial levels to define its strategy for action to promote and protect the rights of the 43,378 indigenous peoples in the Republic of Congo. In partnership with government and other international development partners, UNFPA has advocated for the integration of indigenous peoples concerns in policies and programmes. Moreover, UNFPA has strengthened the institutional and technical capacities of the National Indigenous Peoples Network (RENAPAC) and organized sensitization activities on reproductive health, gender, HIV and sexual violence.

In 2011, UNFPA will strengthen its support in favor of Congolese indigenous peoples, including technical and financial support to the International Forum of Indigenous Peoples of Central Africa, the production of a documentary film on Congolese indigenous women, enhanced HIV prevention support to indigenous peoples, survey on the conditions of living of indigenous women, and advocacy for greater involvement of indigenous peoples in the social, economic and political decision-making processes.

(ii). What are some of the obstacles your Office has encountered in implementing the recommendations of the Permanent Forum, including those addressed specifically to your agency?

Challenges encountered in UNFPA's work on indigenous and ethnic minority issues have varied greatly across countries, influenced, among others, by national priorities and political opportunities. In

many countries, issues of reproductive and sexual health and gender issues are still not a priority at the government level. In some countries, there is a lack of understanding and interest in indigenous issues in particular, and in human rights issues in general.

In other countries, challenges have been related to the lack of both disaggregated data and reliable and updated research studies on indigenous peoples that will inform policy and programmes. Linked to this is the absence of clear information on gaps in policy, programme, capacity, systems and resources as well as development priorities. Other challenges are related to adequate budgets, changes in Government institutions or in staff and turnover of key decision makers within government institutions as well as changes in internal leadership within development organizations. In some instances, an overload of political activities on authorities and native indigenous organizations has impacted how rights and sexual and reproductive health issues are prioritized. In some cases, national health systems and health providers themselves have been reluctant to incorporate the cultural perspective into national programmes. In other instances, gender and reproductive health issues are not high on the agenda of indigenous peoples. There should be a focus on enhanced understanding and appreciation of the need to address reproductive health, population and development, and gender equality issues of indigenous communities. Indigenous communities and organizations need to appropriate and advocate for the intercultural approach to sexual and reproductive health as a priority. Strategies to address these issues should then be integrated in indigenous policies and plans to ensure ownership and sustainability.

In many countries, both indigenous and non-indigenous women do not enjoy the full range of human rights afforded to men. It is through advocacy, women's empowerment programmes and strengthening the participation of indigenous women that obstacles are now being overcome to varying degrees in different countries.

In some cases, the lack of government institutions or non government organizations that monitor and evaluate the recommendations of the Permanent Forum constitute an obstacle for actual integration of the Permanent Forum recommendations into national policies.

(iii). What are some of the factors that facilitate your Office's implementation of the recommendations of the Permanent Forum, including those addressed specifically to your agency?

A significant facilitating factor for UNFPA in many countries has been strong commitment and proactive support from indigenous communities and national institutions dealing with indigenous peoples concerns, as well as strong alliances with main government institutions, traditional authorities and non government organizations, especially indigenous women's groups. Other facilitating factors include the incorporation of indigenous issues and rights in the countries' legal frameworks and in public policies and programmes as well as the progress in the development of socio-demographic and health information on indigenous peoples.

Other facilitating factors are the increased opportunities for inter-agency collaboration. For example, UNFPA's joint programming with UNICEF has strengthened the work with Mayan organizations and communities in the southern part of Belize. UNFPA partnerships with women's machineries in many countries provide an opportunity to reach indigenous women.

In some regions, an environment of open communication on indigenous peoples' issues has helped increase understanding between countries and facilitate progress on these issues. The commitment of local government staff responsible for the programme coordination has been also key in the success of UNFPA's support.

2. **Given the Forum's recommendation for the adoption of policies on indigenous peoples'/ethnic minorities issues, please specify whether your Office has:**

(i). **A national plan or policy or other similar tool on indigenous peoples'/ethnic minorities issues**

UNFPA is in the process of adopting a corporate strategy on indigenous issues. This strategy is grounded on the Universal Declaration of Human Rights, the Universal Declaration of the Rights of Indigenous Peoples, and other international human rights instruments. It follows the UNFPA Strategic Framework 2008-2011/3, and recommendations made from 2003 to 2010 to UNFPA by the UN Permanent Forum on Indigenous Issues (UNPFII). It draws from UNFPA's many years of experience working on indigenous peoples' rights, as well as a consultative process undertaken in 2010, including a global consultation on indigenous issues. Participants included members of UNPFII, NGOs promoting indigenous peoples' rights, UNFPA staff from both headquarters and the field, and representatives of UN sister agencies. The purpose of this consultation was to reach a consensus and common understanding on UNFPA's engagement on indigenous issues, the nature of its commitment, and the specific processes to guide its work. As a collaborative effort, stakeholder feedback was continually sought and incorporated throughout the drafting process.

The goals of the resulting strategy are twofold: 1) To identify strategic priorities forming the core of UNFPA's programming efforts with indigenous peoples; and 2) To lay out the principal elements of an operational plan for implementation and follow up of the framework, with emphasis on creating an enabling environment for indigenous peoples and networks, as well as capacity development and partnership. While recognizing that indigenous communities are not a homogeneous group and that there can be no "one size fits all approach" to UNFPA's programming efforts, the strategy strives to be flexible enough to address a variety of indigenous contexts, yet specific enough to be operational at regional and country levels.

The intention is to create a practical framework and establish a set of unified criteria for UNFPA programming and policy-making.

(iii). **Budgetary allocations for indigenous peoples'/ethnic minorities issues: please specify the amount**

Headquarters
USD 80,000

Sub-regional Office for the Caribbean (SRO)
The resources spent on indigenous peoples' issues in 2010 was approximately USD 114,000.

Bolivia
Total budget for 2010 was USD 190,000.

Colombia
Total budget for 2010 was USD 300,000.

Mexico
Total expenditure in 2010 for the projects with indigenous communities was USD 399,749.

Panama
UNFPA Panama's SRH programme is approximately 70 per cent dedicated to indigenous issues (maternal mortality reduction). Also, the Office's resource mobilization within the current country programme is 30-50 per cent dedicated to the same issue.

Suriname

Procurement of commodities for family planning, prenatal care, safe delivery and cervical cancer screening: approximately USD 89,000

Asia Pacific Regional Office**China**

In 2010: approximately USD 158,000

In 2011: approximately USD 178,000

Lao People's Democratic Republic

UNFPA Lao PDR did not allocate a specific budget for 2010. However, in 2009, the estimated expenditure for the provision of services to the most remote ethnic populations of the eight provinces through community based distributors and village health volunteer was USD 80,000. UNFPA's Lao country office is planning to expand and strengthen the same services to the most remote ethnic communities of the other provinces and the expenditures planned for year 2011 are estimated to be more than USD 100,000.

Mongolia

The budget allocation for UNFPA Mongolia in 2010 was for two projects on quality reproductive health services in Bayan-Ulgii and Khuvsgul provinces in the amount of USD 56,500 and USD 53,400 respectively.

Philippines

UNFPA Philippines has allocated an estimated amount of USD 240,731. This amount reflects direct and indirect contributions to the areas of indigenous peoples'/ethnic minorities.

Thailand

UNFPA Thailand in 2010 allocated for Mae Hong Son (Karen women) USD 53,995 and for Narathiwat (Thai-May women) USD 45,116. These amounts are implemented through local networks, local authority organizations, and hospital and health post.

Vietnam

UNFPA Viet Nam has allocated an estimated amount of USD 5,000,000. Please note that 2011 is the transitional year of UN agencies in Viet Nam before developing the new programme cycle (One Plan III) during 2012-2016.

(iv) Projects/activities on indigenous peoples'/ethnic minorities issues

(In order to facilitate the quantification of data by the Forum, please indicate the number of programmes and projects/activities devoted to indigenous peoples issues in the past year).

For more information on the projects, please see above.

Belize: Four (4)

UNFPA provided technical and financial support to the Belize Family Life Association to build the capacity of community based volunteers. A total of 55 Community Based Distributors (CBD), which included indigenous peoples from rural communities in Belize, were trained in contraceptive technology.

UNFPA provided financial support for a women's symposium that had participation of 106 women representing 51 women's groups from urban and rural communities, including indigenous women.

In the latter part of 2009 and early 2010, UNFPA provided technical support to the revision of the National Gender Policy and the drafting of a situational analysis that served to inform the updating of the policy. The health and social issues affecting the Mayan population were highlighted in the situational analysis.

Additionally, UNFPA provided financial support for the development of quality improvement guidelines for maternal and neonatal care in response to a number of incidents related to maternal and infant mortality, particularly among the Mayan population. As a result of the development of these guidelines, the Ministry of Health is better able to provide improved quality of care to the population.

Suriname: One (1)

UNFPA support to indigenous peoples is mainly through the work done by the Medical Mission.

Guyana: Three (3)

Under the Youth Friendly Services Initiative, UNFPA supported the establishment of a youth friendly space in Region 7 which is one of the hinterland regions populated by Amerindians as well as ongoing support for youth-friendly spaces in Region 1, also inhabited by Amerindians. The Space provides opportunities for adolescents and young people to access information on SRH/HIVAIDS, Gender/GBV, Life Skills and recreational activities.

The Maternal Health Thematic Fund Initiative in the programme development phase identified specific areas of work that directly impact the quality of life and reproductive and maternal health of the Amerindian population including strengthening family planning and increasing access to information and services.

A maternity waiting home for the Amerindian population was completed and will be opened in 2011.

Bolivia: Fourteen (14)

UNFPA Bolivia had 14 total activities on indigenous peoples' issues in 2010.

1. Meeting with indigenous Congress Women of Latin America.
2. Preparation of indigenous women participants to the IX Session of the Permanent Forum of Indigenous Issues.
3. Support to indigenous universities of Bolivia with training and research in the area of sexual and reproductive health.
4. Support to Captancy of Alto Parapetí and the Guarani zone with training and equipment.
5. Support the participation of indigenous women in the course on gender and political incidence.
6. In coordination with the Indigenous Fund, support the participation of indigenous women in the Master's course on Intercultural Health with a focus on sexual and reproductive health.
7. Training on sexual and reproductive health issues to indigenous women from the following organizations: Bartolina Sisa and CNAMIB. Additionally, support the Social Control of the Juana Azurduy Bonus.
8. Support the government and women's participation in activities of the South Link and revision of the issue on intercultural health.
9. Support the installation of consultancy offices on intercultural health in indigenous women organizations.
10. Support to the participation of women in international meetings.
11. Support research on adolescent sexuality with the Ancestral community of the Millennium Heritage.
12. Support the incorporation of women's issues in the Law of Jurisdictional Demarcation for the issue of indigenous justice.
13. Support the participation of indigenous women in regional meetings and meetings on women's health issues.

14. Preparation and management of the citizenship promotion project for the Guarani Peoples of the Alto Parapeti zone.

Guatemala: Twenty seven (27)

UNFPA Guatemala had 27 projects/activities directed to indigenous peoples' issues.

Mexico: Three (3)

Besides the two projects mentioned above (see 1.i.), UNFPA Mexico has also supported a project on sexual and reproductive health with indigenous and afro-descendant young people, with the participation of state institutions and local communities in the State of Oaxaca.

Panama: One (1)

One main indigenous peoples' programme and 8-10 activities.

Suriname: One (1)

In 2010, UNFPA, Suriname purchased commodities in support of the Medical Mission projects, "Integration of cervical cancer screening and early treatment services in the first line health centres of sixteen indigenous communities in the interior of Suriname" and "Towards delivery of quality integrated primary health care services in the Hinterland of Suriname."

In 2011, UNFPA and PAHO have committed to deliver technical assistance to the Medical Mission cancer screening project. UNFPA Suriname will also continue to support the health team group members in improving primary health care.

The training of health workers by local trainers will take place in 2011.

Asia Pacific Regional Office

Cambodia One (1)

UNFPA, Cambodia as part of the Health Sector Support Programme jointly funded by seven development partners, as mentioned above, focuses on ensuring that indigenous peoples' rights, cultures, and traditions are fully respected.

China Four (4)

UNFPA China's main support activities in 2010 include:

- Finalization of a qualitative study on the traditional beliefs and practices of six ethnic groups related to maternal and child health (MCH). Those ethnic minorities were the Miao, Dong, Dai, Jingpo, Hui and Tibetans in Guizhou, Yunnan, Qinghai and Tibet. The findings provided insights for the design of culturally appropriate interventions to improve the health of mothers and children in ethnic communities.
- Elaboration of an advocacy toolkit on maternal and child health in ethnic minority areas for health providers and decision makers. The purpose is to encourage the adoption of culturally sensitive approaches in ethnic minority areas in China. This toolkit contains the first set of programme and policy level recommendations for the consideration of local governments.
- Development of a pilot training course on community-based interventions and client-friendly and culturally sensitive service provision for maternal health care providers operating in ethnic minority areas. In addition to improving the knowledge and attitude of service providers, the objective of the course is to facilitate the dialogue and collaboration with ethnic minorities' stakeholders.
- Support of maternal health care promotion activities locally designed and involving community stakeholders.

Lao People's Democratic Republic

UNFPA PDR office does not have specific activities/projects on ethnic minorities but the effort is to ensure that UNFPA Lao PDR's programme support to the Government reaches ethnic groups.

Mongolia: Four (4)

For UNFPA Mongolia, project activities included provision of mobile sexual and reproductive health services to remote and vulnerable population groups, development and distribution of behaviour change communication materials on sexual and reproductive health issues, organization of capacity building trainings for health service providers and other social service providers, and sensitization activities among local decision makers, community and religious leaders on gender issues.

Thailand: Five (5)

UNFPA Thailand's projects/activities include: strengthening of service provision; capacity building of health services personnel; advocacy; and distributing IEC material, commodities and medical supplies.

Viet Nam: One (1)

Contents of this session have been reported above in(ii).

3. Does your Office have regular or ad hoc capacity-building programmes on indigenous peoples'/ethnic minorities issues for staff, or a plan for capacity-building activities in this area, at headquarters or in the field?

Some country offices have supported specific training on indigenous issues, while others have participated in the UNCT regular trainings

4. Does your Office have a focal point on indigenous issues/ethnic minorities? If so, please provide the Office, name and contact information of this person.

Luz Angela Melo
Email: melo@unfpa.org

Sonia Heckadon
Email: heckadon@unfpa.org

5. Please provide a list of conferences and other meetings organized or supported by your Office on indigenous issues/ethnic minorities for the current year as well as next year.

Headquarters, New York

UNFPA organized a two-day consultation with UNFPA staff from country offices, regional offices, members of the UN Permanent Forum and UN agencies to provide input to the corporate strategy on indigenous issues.

Bolivia

In 2010, UNFPA Bolivia supported the following meetings:

- Meeting of Female Indigenous Congress Women of America
- Conference on Public Policies and Women's Rights
- Meeting of revision of indicators with ethnical relevance with CEPAL/CELADE and indigenous organizations
- Meeting for the revision of the mapping of the norms of intercultural health
- Meeting with indigenous women for the re-launching of the Juana Azurduy Bonus and certification of traditional midwives

- Delivery of equipping health services to the Guaraní People of the Captaincy of Alto Parapetí, the municipality of Lagunillas, jointly with UN System in Bolivia
- Workshop of Rights of the indigenous peoples as a System of United Nations in Bolivia

UNFPA Bolivia will support the following meetings in 2011:

- Meeting with Indigenous Universities of Bolivia for the presentation of results of the diagnosis on sexual and reproductive health
- Meeting and signature of agreement for launching of the citizen promotion programme in the zone of Alto Parapetí
- National conference for the presentation of lessons learned on intercultural health

Colombia

UNFPA Colombia supported the International and Inter Cultural Health Meeting in 2010.

Ecuador

UNFPA Ecuador supported the following meetings and conferences:

- National and regional forums with indigenous women's organizations on women's rights, particularly reproductive rights and the right to a life free of violence
- The First National Congress on Indigenous Women's Right
- V Enlace Continental de Mujeres Indígenas
- VIII & IX Session of the United Nations Permanent Forum on Indigenous Issues

Guatemala

In 2010, UNFPA Guatemala participated in several meetings to promote disaggregating health data for indigenous peoples, in coordination with CEPAL and ECLAC.

Mexico

In 2011, UNFPA Mexico will support the Third Congress of the National Network on Indigenous Population Studies. The Office will also support A Seminar for Reviewing the Progress of the State Components of the Project on Maternal Mortality and Prevention of Gender Violence among Indigenous Communities: Chiapas, Hidalgo and Veracruz.

Nicaragua

UNFPA Nicaragua provided technical and financial support for the development of an International Conference of Afrolatinoamerican and Afrocaribbean women.

Panama

Locally

1. UNFPA Panama office supported the Ministry of Health for the organization of the first Congress on Interculturality and Gyneco-Obstetric Health, held in Chiriquí Province.
2. UNFPA supported the Ngöbe women's congress.
3. For the launch of the State of the World Population 2011, the UNFPA CO included indigenous Ngöbe and Buglé women as panelists to share their emergency recovery experiences with a large audience.

At the interagency level

4. UNFPA chaired the Technical Group on Indigenous Peoples, which came into existence in 2010 as a consequence of UNCT discussions over the course of 2009. The group completed its terms of reference and held five regular and two extraordinary meetings, with seven participating agencies and the OCR, including an exchange with indigenous women leaders. The group also led the interagency collaboration for commemorating International Indigenous Peoples Day with the Ombudsperson office.

Salvador

Throughout the year, UNFPA in Salvador supported four regional meetings and a national gathering of several indigenous organizations who requested assistance to work on a common agenda to present to governmental authorities.

Vietnam

In 2010, UNFPA, Viet Nam supported the Ministry of Health to conduct the National Workshop on Population and Reproductive Health Work for Ethnic People in Viet Nam. The purposes of the workshop were to share experiences in implementation policies/interventions for ethnic groups and provide recommendations for effective implementation of these policies/interventions to contribute to the implementation of Pop/RH strategy period 2011-2020.